

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

June 5, 2017

Ms. Emma Sheldon, Manager
Holton Home
158 Western Avenue
Brattleboro, VT 05301

Dear Ms. Sheldon:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on April 25, 2017. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in black ink, appearing to read "Pamela M. Cota, RN".

Pamela M. Cota, RN
Licensing Chief



Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/LCU IDENTIFICATION NUMBER 0048	(X2) MULTIPLE CONSTRUCTION A BUILDING B WING	(X3) DATE SURVEY COMPLETED C 04/25/2017
NAME OF PROVIDER OR SUPPLIER HOLTON HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 158 WESTERN AVENUE BRATTLEBORO, VT 05301		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R100	Initial Comments.	R100	See attached Plans of Correction.	
R214	VI. RESIDENTS' RIGHTS SS=C	R214	<p>6.2 Each home shall establish and adhere to a written policy, consistent with these regulations, regarding the rights and responsibilities of residents, which shall be explained to residents at the time of admission</p> <p>This REQUIREMENT is not met as evidenced by: Based on staff interview and record review the facility has failed to explain to any newly admitted residents, their Resident Rights. The findings include the following:</p> <p>Per review of the admission agreement at approximately 10 AM on 4/25/17, page #3 identifies, "Your Rights and Responsibilities". The 1st paragraph documents that "the resident will receive a summary of those rights on admission day". The document Resident Rights, provided on admission, lists only 9 of 21 Resident Rights. The list is not an inclusive list. The document states "A complete copy of your rights is posted by the Sign Out sheet in the 1st floor hallway".</p> <p>Per interview with the Manager of the facility at approximately 10 AM, confirmation was made the list provided is what is given to residents on admission.</p>	

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Stevens Sheldore
STATE FORM

TITLE
Site Director
WBMM:1
05/19/17
If continuation sheet 1 of 7

R214-R322 POC's accepted 5/31/17 mbutrand RN/PNC

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CNA IDENTIFICATION NUMBER: 0048	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING:	(X3) DATE SURVEY COMPLETED C 04/25/2017
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R221	Continued From page 1	R221		
R221	VI. RESIDENTS' RIGHTS SS=D	R221		
<p>6.7 Residents may manage their own personal finances. The home or licensee shall not manage a resident's finances unless requested in writing by the resident and then in accordance with the resident's wishes. The home or licensee shall keep a record of all transactions and make the record available, upon request, to the resident or legal representative, and shall provide the resident with an accounting of all transactions at least quarterly. Resident funds must be kept separate from other accounts or funds of the home.</p> <p>This REQUIREMENT is not met as evidenced by: <ul style="list-style-type: none"> - Based on staff interview and record review the facility failed to obtain written request from one applicable resident to assist/manage his/her finances. For Resident #1 the findings include the following: <p>Per review of Resident #1's medical record, to include financial documentation, there is no evidence that a written request was obtained from Resident #1 for the facility to assist and/or manage the resident's financial transactions.</p> <p>Per interview with the Executive Director (ED), confirmation was made at approximately 12:25 PM, that a few years ago Resident #1 would present twice a month with his/her bills that needed to be paid. The ED would make out the check and Resident #1 would sign the check. It would be placed in the envelope and mailed to the receiver. Resident #1 also had difficulty balancing the checkbook, so together they would</p> </p>				

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R221	Continued From page 2 balance the checkbook. Gifts to family members, donations to various organizations and all Resident #1's bills were managed by the ED. A General Power of Attorney was legally obtained on 1/22/16. The ED confirms that a written request for assistance was never acquired. See also R313.	R221	
R313 SS=D	XI. RESIDENT FUNDS AND PROPERTY 11.1 A resident's money and other valuables shall be in the control of the resident, except where there is a guardian, attorney in fact (power of attorney), or representative payee who requests otherwise. The home may manage the resident's finances only upon the written request of the resident. There shall be a written agreement stating the assistance requested, the terms of same, the funds or property and persons involved. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review the facility failed to obtain written request from one applicable resident to assist/manage a his/her finances. For Resident #1 the findings include the following: Per review of Resident #1's medical record, to include financial documentation, there is no evidence that a written request was obtained from Resident #1 for the facility to assist and/or manage the resident's financial transactions. Per interview with the Executive Director (ED),	R313	

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R313	Continued From page 3 confirmation was made at approximately 12:25 PM, that a few years ago Resident #1 would present twice a month with his/her bills that needed to be paid. The ED would make out the check and Resident #1 would sign the check. It would be placed in the envelope and mailed to the receiver. Resident #1 also had difficulty balancing the checkbook, so together they would balance the checkbook. Gifts to family members, donations to various organizations and all Resident #1's bills were managed by the ED. A General Power of Attorney was legally obtained on 1/22/16. The ED confirms that a written request for assistance was never acquired.	R313		
R316 SS=F	XI. RESIDENT FUNDS AND PROPERTY 11.4 The resident shall not be solicited for gifts or other consideration by persons connected with the home, in any way. This REQUIREMENT is not met as evidenced by: Based on record review and confirmed by staff interview the facility has solicited annual donations from residents and their family members for contributions to the Staff Appreciation Fund. The findings include the following: Per review of the line list of staff bonuses for the years 2015 and 2016 and letters sent to families of residents, in 2016 a letter was sent to resident families asking them to consider making a gift from "your" resident to the Staff Appreciation Fund, stating 100% of the donations received are distributed to the staff.	R316		

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R316	Continued From page 4	R316		
<p>Per interview with the Executive Director (ED) at 12:25 PM, confirmation is made that these letters are sent out annually to families and they can contribute what they want. A line list identifies various donations from \$25.00 up to \$1,000.00. Resident #1 has contributed \$1,000.00 annually since 2013.</p> <p>Per employee hand book, page #3 identifies that no collections of money from residents are to be taken for the benefit of residents, staff or any other organization or fundraiser without the approval of the site Director or the ED.</p> <p>See also R322.</p>				
R322	XI. RESIDENT FUNDS AND PROPERTY SS=F	R322		
<p>11.9 No licensee, staff or other employee of the home may solicit, offer or receive a gift, including money or gratuities, from a resident. Nominal gifts, such as candy or flowers that can be enjoyed by all staff, are permissible.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and confirmed by staff interview the facility has solicited and received donations of money from residents and their family members for the Staff Appreciation Fund and other various facility improvements. The findings include the following:</p> <ol style="list-style-type: none"> 1. Per review of the line list of staff bonuses for the years 2015 and 2016 and letters sent to families of residents, in 2016 a letter was sent to resident families asking them to consider making 				

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R322	<p>Continued From page 5</p> <p>a gift from "your" resident to the Staff Appreciation Fund, stating 100% of the donations received are distributed to the staff:</p> <p>Per interview with the Executive Director (ED) at 12:25 PM, confirmation is made that these letters are sent out annually to families and they can contribute what they want. A line list identifies various donations from \$25.00 up to \$1,000.00. Resident #1 has contributed \$1,000.00 annually since 2013.</p> <p>Per employee hand book, page #3 identifies that no collections of money from residents are to be taken for the benefit of residents, staff or any other organization or fundraiser without the approval of the Site Director or the ED. The ED confirms that the policy was written to discourage staff from selling Girl Scout cookies and/or raffle tickets to residents.</p> <p>2. Holton Home has received and accepted the following donations by Resident #1 who has lived in the facility since October 2010:</p> <ul style="list-style-type: none"> 11/22/11 - \$6,000.00 update of Call Bell System 12/14/11 - \$2,000.00 updated for Call Bell System 12/6/12 - \$3,000.00 Gift to the House 4/11/13 - \$ 500.00 see memo 8/6/13 - \$1,500.00 Celebration Walkway 12/24/13 - \$1,000.00 Staff Bonus 2/13/14 - \$ 150.00 Piano Tuning 9/15/14 - \$8,000.00 Capital Campaign 9/29/14 - \$ 100.00 Staff Appreciation Fund 12/15/14 - \$1,000.00 Staff Appreciation Fund 10/28/15 - \$10,224.12 Dining Room Chairs 12/16/15 - \$ 1,000.00 Staff Appreciation 12/19/16 - \$ 1,000.00 Staff Appreciation <p>Total of \$35,474.12 donations</p>	R322		

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R322	Continued From page 6	R322	Per interview with the Executive Director (ED) at approximately 12:25 PM confirmation was made that the Resident #1 wanted to donate to the facility, s/he did not want to wait for funds to be acquired for updating the call bell system nor was s/he was comfortable sitting on the dining room chairs and wanted them replaced. The ED confirms that it was never suggested to Resident #1 to purchase a chair that s/he would be comfortable sitting in. The ED was asked if it was troublesome accepting these large sums of money from the resident, and the response was "I knew she had the money and it would not create a hardship for her".	

5/26/2017

Plan of Correction (POC)
Holton Home Inc.
158 Western Ave
Brattleboro, VT 05301

Site Director/Manager: Emma Sheldon

As a result of the survey conducted on 4/25/17, the below actions have taken place to ensure that we are back in compliance with the cited regulations, and that we continue to maintain compliance.

R214 VI. Residents Rights 6.2

1. A document was created as an exact duplicate of what is listed in the regulations for "residents' rights," and information regarding how to file a grievance is included at the bottom of the document (see attached). A policy for residents' rights has been established, given to all staff, and added to the policies and procedures manual (see attached). A full copy of the residents' rights document was given to all staff at a recent staff meeting on 5/24/17, and each right was thoroughly reviewed. A policy on residents' rights has been added to the staff manual and a copy has been given to all employees (see attached).
2. The full residents rights document will be given to every resident upon admission, and an explanation of this is included in the admissions agreement (see attached).
3. A box is included on the admissions checklist to ensure that the residents rights document is given to every resident upon admission.
4. The corrective actions were completed as of 5/19/2017, and the document was given to all staff as of 5/24/17.

R221 VI. Residents Rights 6.7

1. All residents who have chosen to be involved with the petty cash system have signed a written agreement which is kept in their file. A record and receipts of all transactions are kept by the Site Director and the Executive Assistant. A policy has been put into place which was created from the state regulations called "handling resident money" (see attached). The policy states that no employee shall manage a residents' money without obtaining a written request from the resident. A policy on residents rights has been added to the staff manual and a copy has been given to all employees (see attached).
2. If a resident provides a written request to an employee asking for them to manage their money, the employee will communicate with the Site Director/manager immediately. The Site Director/manager will review the request with the Resident Care Administrator to discuss the

residents level of cognition prior to making a decision. The request will be discussed with the residents POA or guardian if applicable.

3. Each resident will be informed about the petty cash system upon admission and will be given the opportunity at that time to sign a written request to manage money. Resident rights will be reviewed annually and as needed to ensure that staff have a clear understanding of this resident right, and that all staff are in compliance.

4. This information was reviewed with all employees at the staff meeting on 5/24/17. This corrective action is in effect immediately.

R313 XI. Residents Funds and Property 11.1

1. A policy called "handling residents money" has been established (see attached). All staff have read this policy and have signed a form agreeing to follow the policy. No employee is permitted to write checks for residents or assist them with paying bills. Any resident request for an employee to manage money will be obtained in writing and immediately reviewed by the Site Director/Manager. A policy on residents' rights and gifts from residents has been added to the staff manual and a copy has been given to all employees (see attached).

2. If a resident provides a written request to an employee asking for them to manage their money, the employee will communicate with the Site Director/manager immediately. The Site Director/manager will review the request with the Resident Care Administrator to discuss the residents level of cognition prior to making a decision. The request will be discussed with the residents POA or guardian if applicable.

3. The staff manual will be given to all new employees and they will be required to sign off on reading the manual. Resident rights will be reviewed annually and as needed to ensure that staff have a clear understanding of this resident right, and that all staff are in compliance.

4. This information was reviewed with all employees at the staff meeting on 5/24/17. This corrective action is in effect immediately.

R316 XI Residents Funds and Property 11.4

1. A policy called "handling residents money" has been established (see attached). All staff have read this policy and have signed a form agreeing to follow the policy. No employee or other considerations connected with the home is allowed to solicit residents for gifts. Staff appreciation letters are not given to residents and the wording in future letters will not be written in a way that could be interpreted as a solicitation by family members. A policy on residents' rights and gifts from residents has been added to the staff manual and a copy has been given to all employees (see attached).

2. All staff will review and sign off on this policy upon hire. If an employee is suspected of soliciting residents, disciplinary action will begin immediately.

3. The staff manual will be given to all new employees and they will be required to sign off on reading the manual. Resident rights will be reviewed annually and as needed to ensure that staff have a clear understanding of this resident right, and that all staff are in compliance.

4. This information was reviewed with all employees at the staff meeting on 5/24/17. This corrective action is in effect immediately.

R322 XI. Residents Funds and Property 11.9

1. A policy called "handling residents money" has been established (see attached). All staff have read this policy and have signed a form agreeing to follow the policy. No employee or other considerations connected with the home is allowed to solicit residents for gifts. Staff appreciation letters are not given to residents and the wording in future letters will not be written in a way that could be interpreted as a solicitation by family members. A policy on residents' rights and gifts from residents has been added to the staff manual and a copy has been given to all employees (see attached).

2. All staff will review and sign off on this policy upon hire. If an employee is suspected of soliciting residents, disciplinary action will begin immediately.

3. The staff manual will be given to all new employees and they will be required to sign off on reading the manual. Resident rights will be reviewed annually and as needed to ensure that staff have a clear understanding of this resident right, and that all staff are in compliance.

4. This information was reviewed with all employees at the staff meeting on 5/24/17. This corrective action is in effect immediately.



Emma Sheldon
Site Director/Manager

Residents' Rights

(As written in the Vermont State Residential Care Home Regulations)

1. Every resident shall be treated with consideration, respect and full recognition of the resident's dignity, individuality, and privacy. A home may not ask a resident to waive the resident's rights.
2. Each home shall establish and adhere to a written policy, consistent with these regulations, regarding the rights and responsibilities of residents, which shall be explained to residents at the time of admission.
3. Residents may retain personal clothing and possessions as space permits, unless to do so would infringe on the rights of others or would create a fire or safety hazard.
4. A resident shall not be required to perform work for the licensee. If a resident chooses to perform specific tasks for the licensee the resident shall receive reasonable compensation which shall be specified in a written agreement with the resident.
5. Each resident shall be allowed to associate, communicate and meet privately with persons of the resident's own choice. Homes shall allow visiting hours from at least 8 a.m. to 8 p.m., or longer. Visiting hours shall be posted in a public place.
6. Each resident may send and receive personal mail unopened.
7. Residents have the right to reasonable access to a telephone for private conversations. Residents shall have reasonable access to the home's telephone except when restricted because of excessive unpaid toll charges or misuse. Restrictions as to telephone use shall be in writing. Any resident may, at the resident's own expense, maintain a personal telephone in his or her own room.
8. A resident may complain or voice a grievance without interference, coercion or reprisal. Each home shall establish a written grievance procedure for resolving residents' concerns or complaints that is explained to residents at the time of admission. The grievance procedure shall include at a minimum, time frames, a process for responding to residents in writing, and a method by which each resident filing a complaint will be made aware of the Office of the Long-Term Care Ombudsman and Vermont Protection and Advocacy as an alternative or in addition to the home's grievance mechanism.
9. Residents may manage their own personal finances. The home or licensee shall not manage a resident's finances unless requested in writing by the resident and then in accordance with the resident's wishes. The home or licensee shall keep a record of all transactions and make the record available, upon request, to the resident or legal representative, and shall provide the resident with an accounting of all transactions at least quarterly. Resident funds must be kept separate from other accounts or funds of the home.

10. The resident's right to privacy extends to all records and personal information. Personal information about a resident shall not be discussed with anyone not directly involved in the resident's care. Release of any record, excerpts from or information contained in such records shall be subject to the resident's written approval, except as requested by representatives of the licensing agency to carry out its responsibilities or as otherwise provided by law.
11. The resident has the right to review the resident's medical or financial records upon request.
12. Residents shall be free from mental, verbal or physical abuse, neglect, and exploitation. Residents shall also be free from restraints as described in Section 5.14.
13. When a resident is adjudicated mentally disabled, such powers as have been delegated by the Probate or Family Court to the resident's guardian shall devolve to the guardian pursuant to applicable law.
14. Residents subject to transfer or discharge from the home, under Section 5.3 of these regulations, shall:

 - 14.a Be allowed to participate in the decision-making process of the home concerning the selection of an alternative placement;
 - 14.b Receive adequate notice of a pending transfer; and
 - 14.c Be allowed to contest their transfer or discharge by filing a request for a fair hearing before the Human Services Board in accordance with the procedures in 3 V.S.A. §3091.
15. Residents have the right to refuse care to the extent allowed by law. This includes the right to discharge himself or herself from the home. The home must fully inform the resident of the consequences of refusing care. If the resident makes a fully informed decision to refuse care, the home must respect that decision and is absolved of further responsibility. If the refusal of care will result in a resident's needs increasing beyond what the home is licensed to provide, or will result in the home being in violation of these regulations, the home may issue the resident a thirty (30) day notice of discharge in accordance with section 5.3.a of these regulations.
16. Residents have the right to formulate advance directives as provided by state law and to have the home follow the residents' wishes.
17. ACCS residents have the right to be away from the home for voluntary leaves of more than 24 hours, unless a legally appointed guardian directs the home otherwise. ACCS residents have the right to make decisions about such voluntary leaves without influence from the home.

18. The enumeration of residents' rights shall not be construed to limit, modify, abridge or reduce in any way any rights that a resident otherwise enjoys as a human being or citizen. A summary of the obligations of the residential care home to its residents shall be written in clear language, large print, given to residents on admission, and posted conspicuously in a public place in the home. Such notice shall also summarize the home's grievance procedure and directions for contacting the Ombudsman Program and Vermont Protection and Advocacy, Inc.

Residents are free to voice a grievance. First, speak with Site Director Emma Sheldon or Resident Care Administrator Linda Hastings. If you are not satisfied with the result, put your complaint in writing to Emma Sheldon. You will get a written response within seven days. If you are not satisfied with that response and would like outside help, you may call the Long-Term Care Ombudsman, Katrina Boemig, at 802-885-5181 or, toll free, 800-769-9164. You may also write the agency that licenses Holton Home as a Residential Care Home: Division of Licensing and Protection, Department of Aging and Disabilities, 103 S. Main St., Waterbury, VT 05671-2301.

Handling Resident Funds

Purpose: To establish clear guidelines for the appropriate handling of resident's funds that are in compliance with the State of Vermont Residential Care Home Regulations, XI Resident Funds and Property.

Summary: There are limited circumstances in which a Bradley House or Holton Home staff member, Board member or Visiting Committee member is allowed to manage a resident's funds. A resident's valuables, including currency, is their personal and private property, and will be treated as such, in keeping with the RCH Regulations and Resident's Rights. The only exception is when there is a guardian, power of attorney, or representative payee designated to handle such property.

Processes/Procedures:

- 1) A resident's money and other valuables shall be in the control of the resident, except where there is a guardian, power of attorney, or representative payee who requests otherwise. A resident has the right to keep money on their person or in their room; resident money should never be touched by a staff member unless asked to do so by the resident. (VT State RCH Reg 11.1)
- 2) If the resident, guardian, power of attorney, or designated representative payee requests the home to hold petty cash for them, a written agreement must be signed which states the assistance requested, the terms of same, the funds or property, and persons involved. (Reg 11.1)
- 3) If the home manages the resident's petty cash, the home must keep a record of all transactions, provide the resident with a quarterly statement and keep all resident funds separate from the home or licensee's funds. Only a designated staff member can handle the petty cash account and is responsible to track and record and update the record as each transaction occurs. (Reg 11.2)
- 4) Residents shall not be solicited for gifts or other consideration by persons connected with the home, in any way. (Reg 11.4)
- 5) When it becomes apparent that a resident is no longer capable of managing funds and/or property, the licensee shall contact the resident's legal representative if any, or the next of kin. If there is no legal representative or next of kin, the licensee shall contact the licensing agency. (Reg 11.5)
- 6) Staff, Board members, and Visiting Committee members may not manage a resident's money, write checks on their behalf, balance their check book, or otherwise involve themselves in a resident's finances unless they are the resident's family member and are guardian, trustee or financial power of attorney for the resident. Proof of guardianship, trusteeship or power of attorney for finances must be presented prior to any transactions taking place. (Reg 11.8)
- 7) No licensee, staff or other employee of the home may solicit, offer or receive a gift, including money or gratuities, from a resident. Nominal gifts, such as candy or flowers that can be enjoyed by all staff, are permissible. (Reg. 11.9)

Administrator. There may be exceptions to the above, however before deciding which information would be an exception, you must check with your supervisor.

Gifts from Residents

No staff or other employee of the home may solicit, offer or receive a gift, including money or gratuities (tips), from a resident. Nominal gifts, such as candy or flowers that can be enjoyed by all staff, are permissible. This includes used clothing or any belongings. If a resident insists on giving you money, please kindly decline and ask them to speak with the Site Director. If a resident asks about purchasing something for the home or to donate money to the home, please immediately direct them to the Site Director. Money is not allowed to be accepted or taken from any resident at any time, and the Site Director will explain this to the resident. No staff or other employee of the home may take money from a resident as to run an errand for them etc. Any questions or resident concerns with this policy should be directed to the Site Director.

Residents Rights

All employees will read, understand, and follow the resident rights as listed in the Vermont Residential Care Regulations. Employees will receive a copy of the residents' rights upon hire. Employees will then sign the document stating that it has been read, and that the employee agrees to follow all resident rights. The resident rights will be reviewed annually with all employees, and on other occasions when warranted. If a staff member violates residents right, disciplinary actions will be put into place to ensure full compliance of the regulations.

Mandatory Reporting

As an employee of a residential care home, you are mandated by law to report suspected neglect, abuse or exploitation of someone in our care. Holton Home fully supports this obligation. Your suspicions should be reported within 24 hours to the Site Director or the Resident Care Administrator. If you believe neglect, abuse or exploitation has occurred and believe the person to whom you reported did not pass the report on to Adult Protective Services (APS), you are obligated to call APS yourself, at 1-800-564-1612.

You will be asked annually to sign an affirmation as to whether you are aware of any abuse or neglect. You are subject to disciplinary action up to and including termination if you are aware of neglect or abuse on the part of a Holton Home employee and do not report it to the Site Director or Resident Care Administrator.

Whistleblower Protection

It is the intent of Holton Home to adhere to all laws and regulations that apply to the organization. If any employee reasonably believes that some policy, practice, or activity of Holton Home is in violation of law or regulation, a written complaint may be filed by that employec with the Site Director. If any employee believes that the Site Director is in

Admission Policy

Holton Home serves elders. Younger, disabled applicants may be accepted, but very rarely and only if their age, reason for seeking admission, and daily habits closely approximate Holton Home's other residents.

Admission to the Home requires

1. A completed Application form, less than one year old.
2. A completed Medical Form, less than one year old and reflective of the applicant's current medical condition.
3. The applicant has a doctor and, if a new patient, a first appointment scheduled within 30 days of admission.
4. An interview of the applicant and tour of the Home. (This may be waived under certain geographical constraints, but more information about daily functioning and needs will be required.)
5. The ability to pay Holton Home's private pay rates for at least three years (unless applying under the Medicaid Waiver ERC program). *
6. The ability to move to and from the Dining Room.
7. Not diminishing the quality of life of other residents.
8. Medical and personal care needs that can be met by the Home's staff.
9. If insulin dependent, must self inject and must be on a consistent dose or be independent in figuring and drawing up doses.
10. Approval of the Admissions Committee. *

Upon admission to the Home the resident and/or their legal representative, the financially responsible person, and the Site Director will sign an Agreement which details services provided, charges for these services and includes a full copy of the residents' rights and responsibilities.

Due on admission day are the rent for the remainder of the month of admission, rent for the following month if admission is within ten days of the end of the month, cable television charges for the same periods, and the Entrance Fee. The Entrance Fee is equal to a 30-day month's rent. If the resident is returning to the Home and has been gone less than ten months, the Entrance Fee will be proportionally reduced.

Residents who require only short-term respite care will not be charged an Entrance Fee. Instead, their Daily Rate will be 50% higher. At the end of two months, if the resident chooses to continue their stay, this 50% surcharge will be discontinued and they will be charged a usual Daily Rate.

*Not required for respite admission.